

Request for Waiver

Applicant Name: _____ Date of Request: _____

Address: _____

Farm Bill Program: (Check One)

☐ WHIP ☐ EQIP ☐ AMA ☐ CSP ☐ CB

I am requesting a waiver to begin the _____ practice. I have not
(Name of Practice)

started implementation yet, but I plan to proceed with construction or installation of the practice upon receipt of an approved NRCS design or specifications.

My reason(s) for this request are as follows:

I understand this does not increase my chances for receiving a contract and that I am financially responsible for all expenses incurred on this practice. Only if I am approved for and sign a contract will I receive practice completion payments.

I understand that I will be ineligible to receive any payments if any of the following occurs:

- The contract is not approved
- The practice is not completed in a manner that meets NRCS standards and specifications.
- The requested practice is not included in the approved conservation plan for funding.

Participants

Signature: _____ Date: _____

NRCS District Conservationist – CONCURRENCE

1. There is a current application for the appropriate program signed by the applicant ☐ Yes ☐ No
2. The applicant will be provided a design and current standards and specifications for the practices requested in this waiver before construction by _____.
(Date)
3. The practice requested in the waiver is included in the applicants current conservation plan ☐ Yes ☐ No

Print Name

Signature

Date: _____

NRCS ASTC-FO - CONCURRENCE

Print Name

Signature

Date: _____